

Application Data Sheet**Application Information**

Application number:: 09/736,617
Filing Date:: 12/13/00
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: CONDITIONAL ACCESS FOR FUNCTIONAL UNITS
Attorney Docket Number:: 018926-004400US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 9
Small Entity?:: No
Latin name::
Variety denomination name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Reem
Middle Name::
Family Name:: Safadi
City of Residence:: Horsham
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 429 Brown Briar Circle
City of Mailing Address:: Horsham
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19044

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Lawrence
Middle Name:: D.
Family Name:: Vince
City of Residence:: Lansdale
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 114 Aileen Dr.
City of Mailing Address:: Lansdale
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19446

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Douglas
Middle Name:: S.
Family Name:: Makofka
City of Residence:: Willow Grove
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 516 Fairhill Street
City of Mailing Address:: Willow Grove
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 29090

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: John
Middle Name::
Family Name:: Okimoto
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 14139 Via Corsini
City of Mailing Address:: San Diego
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 92128

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eric
Middle Name:: J.
Family Name:: Sprunk
City of Residence:: Carlsbad
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 7309 Bolero Street
City of Mailing Address:: Carlsbad
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 92009

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::